

School Building Authority of West Virginia  
**CONTRACTOR QUALIFICATION STATEMENT**  
**SBA FORM 405**

**(This form must be completed and submitted to the Owner, Architect and SBA by 4:00 PM Eastern Time on or before the third business day after bids are received.)**

<b>Submit to:</b>	<b>Name</b>	<b>Email Address</b>
Owner:	_____	_____
Architect:	_____	_____
SBA:	_____	_____

**Submitted By:** Firm Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Principal Office Location (City, State): \_\_\_\_\_  
Valid WV Contractor License Number: \_\_\_\_\_

**Qualification Statement Submitted For (Insert Project Name):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Type of Work to be Performed on this Project:**

Site Preparation	_____	General Construction	_____
Roofing	_____	Plumbing	_____
HVAC	_____	Sprinkler	_____
Electrical	_____	Other (Specify: _____)	_____

**ORGANIZATION:**

**Type of Entity:**

Corporation	_____	Individual	_____
Partnership	_____	Other	_____

**Name of Principal, Owners or Partners:**

<b>Name</b>	<b>Position</b>	<b>Years of Service with Organization</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Number of years this organization has been in business? \_\_\_\_\_

Have members of this organization operated under former names/businesses? Yes: \_\_\_\_ No: \_\_\_\_

**NOTE:** If “yes,” list name, type of entity and names of principal, owners or partners.

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Provide a brief description of the general type of construction the firm performs.

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**Key Personnel:**

Please provide information regarding the experience and skill of the bidder’s key personnel (Project Manager, Superintendent, Foreman, etc.) for the project. Attach additional information, if required.

Name	Position – Experience
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**RELEVANT PROJECT EXPERIENCE:**

If you have completed school construction work or similar construction, or completed work on SBA projects, provide a list of projects with individual references that can verify the quality of your work, your ability to construct within budget, and your ability to work within the proposed schedule.

**NOTE:** Attach additional information, if necessary. Marked as Attachment \_\_\_\_.

Project	Location	Reference & Contact Info.
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Please list all major construction projects (schools or other projects) your organization has **in progress** providing the name of Project, Owner, Architect, contract amount, Bonding Company, Insurance Carrier, percentage complete and scheduled completion date.

Marked as Attachment \_\_\_\_.

Please list major projects (schools or other projects) your organization has **completed** in the past five years, giving the name of project, Owner, Architect, contract amount, Bonding Company, date of completion and percentage of the cost of the work performed with your own forces. Note whether or not each project was completed on schedule.

Marked as Attachment \_\_\_\_.

**REGULATORY COMPLIANCE:**

At any time during the past five years, has your firm, or any of its owners or officers been found in violation or in default in any of the following categories:

*NOTE: If answered "Yes," attach detailed explanation. Marked as Attachment \_\_\_\_.*

Worker's Compensation Laws	Yes _____	No _____
Unemployment Compensation Laws	Yes _____	No _____
Federal Prevailing Wage Laws	Yes _____	No _____
Occupational Safety & Health Administration (OSHA)	Yes _____	No _____
Fair Labor Standards Act	Yes _____	No _____
West Virginia Jobs Act (WV Code §21-1C)	Yes _____	No _____
Immigration Reform and Control Act (IRCA)	Yes _____	No _____

**CLAIMS AND SUITS:**

*NOTE: If answered "Yes," attach detailed explanation. Marked as Attachment \_\_\_\_.*

Has your organization ever failed to complete any Construction work it has been awarded? Yes \_\_\_\_\_ No \_\_\_\_\_

Within the last five years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? Yes \_\_\_\_\_ No \_\_\_\_\_

Has there been in the last ten (10) years, or is there now pending or threatened, any litigation, arbitration, investigation, or governmental or regulatory proceeding involving claims in excess of \$100,000 or requesting a declaratory judgment or injunctive relief with respect to the construction or operation of any building which your firm, its principals, predecessors or affiliates constructed? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there any potential claim, demand, litigation, arbitration, investigation, governmental proceeding or regulatory proceeding involving your firm, or its principals, predecessors or affiliates? Yes \_\_\_\_\_ No \_\_\_\_\_

In addition to the litigation, arbitration, investigation or governmental or regulatory proceeding referred to in the preceding paragraphs, is there any litigation, arbitration, investigation or governmental or regulatory proceeding now pending or threatened to which your firm is or may be a party, or are you aware of any potential claim or demand, which might otherwise affect the capacity of your firm to perform with respect to your involvement with the School Building Authority of West Virginia, whether or not it concerns other work which you have undertaken? Yes \_\_\_\_\_ No \_\_\_\_\_

At any time during the past five (5) years has your firm, or any of its owners or officers, been debarred or otherwise deemed ineligible to bid on or be awarded a public works contract or perform work as a subcontractor on a public works contract, under the laws of the federal government, state, county or municipal authority? Yes \_\_\_\_\_ No \_\_\_\_\_

**NOTE:** If answered “Yes,” attach detailed explanation. Marked as Attachment \_\_\_\_.

At any time during the last five (5) years has your firm, or any of its owners or officers, been convicted of a crime relating to the awarding of a contract for a public works construction project, or the bidding or performance of a public works project? Yes \_\_\_\_ No \_\_\_\_

Is there any person owing ten (10) percent or more of this company, or officer of the company, that is currently, or at the time of the bid, on the Worker’s Compensation Employer Violator System? Yes \_\_\_\_ No \_\_\_\_

If yes, provide name of individual. \_\_\_\_\_  
\_\_\_\_\_

**BANKRUPTCY:**

Has your firm, its principals, predecessors, or affiliates been the subject of any proceeding under the federal bankruptcy laws or any other proceeding under state or federal law in which a court or government agency has assumed jurisdiction over any of the assets or business of your firm, its principals, predecessors or affiliates? Yes \_\_\_\_ No \_\_\_\_  
If so, please identify the proceedings, the court or governmental body and the date such jurisdiction was assumed in an attachment.

**FINANCIAL CONDITION:**

\* As a part of this form, Prime Contractors are required to submit a financial statement to be reviewed only by the SBA. This portion of the form shall be submitted directly to the SBA. These documents are to be treated in highest confidentiality and are to be reviewed only by those at the SBA that are involved with the selection of the Contractor.

**NOTE:** *The Contractor Qualification Statement is considered incomplete unless this financial information is provided by the Prime Contractor.*

Please attach your organization’s last two (2) years financial statements. Minimum requirements for financial statements provided by lowest qualified bidder are:

- Accountants compilation report;
- Balance sheet;
- Income statement;
- Statement of changes in retained earnings;
- Statement of cash flows; and
- Notes to the financial statement.

**REFERENCES:**

Please list below trade references:

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Please list below bank references:

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Please list below completed project owner references:

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**AFFIRMATION, SIGNATURE, AND NOTARY:**

By signing this form, the bidder's authorized signer affirms and acknowledges under penalty of law for false swearing (W.Va. Code §61-5-3) that the undersigned certified under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

WITNESS THE FOLLOWING SIGNATURE:

Name of Organization: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of: \_\_\_\_\_

County of: \_\_\_\_\_, to-wit;

Taken, subscribed, and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

My Commission expires: \_\_\_\_\_, 20\_\_.

AFFIX SEAL HERE

NOTARY PUBLIC: \_\_\_\_\_